

STATEMENT OF ECONOMIC INTERESTS

FILED
Ventura County
County Clerk and Recorder

Date Received

FEB 15 2011

COVER PAGE



2011 FEB 22 AM 10:58



Order Deputy

Please type or print in ink.

NAME OF FILER

(LAST)

(FIRST)

(MIDDLE)

Zamagoza

John

C.

1. Office, Agency, or Court

Agency Name

Ventura County Board of Supervisors

Division, Board, Department, District, if applicable

District 5

Your Position

County Supervisor

► If filing for multiple positions, list below or on an attachment.

Agency: _____

Position: _____

2. Jurisdiction of Office (Check at least one box)

☐ State

☐ Multi-County _____

☐ City of _____

☐ Judge (Statewide Jurisdiction)

☒ County of Ventura

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

-or-

The period covered is _____, through December 31, 2010.

☐ Assuming Office: Date _____

☐ Leaving Office: Date Left _____
(Check one)

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ The period covered is _____, through the date of leaving office.

☐ Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

☐ Schedule A-1 - Investments - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule B - Real Property - schedule attached

► Total number of pages including this cover page: 6

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I certify under penalty of perjury under the laws of the State of California that

Date Signed

Feb. 15, 2011
(month, day, year)

Signature

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name _____

► STREET ADDRESS OR PRECISE LOCATION
721 "F" St.

CITY
Oxnard CA 93030

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:
 _____ / _____ / 10
 ACQUIRED DISPOSED

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ Other _____

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
RENT PAYMENTS

► STREET ADDRESS OR PRECISE LOCATION
808 "F" St.

CITY
Oxnard CA 93030

FAIR MARKET VALUE
☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:
 _____ / _____ / 10
 ACQUIRED DISPOSED

NATURE OF INTEREST
☒ Ownership/Deed of Trust ☐ Easement
☐ Leasehold _____ Yrs. remaining ☐ Other _____

IF RENTAL PROPERTY, GROSS INCOME RECEIVED
☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.
RENT PAYMENTS

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*
JP MORGAN CHASE

ADDRESS (Business Address Acceptable)
P.O. Box 260172

BUSINESS ACTIVITY, IF ANY, OF LENDER
BATON ROUGE LA, 70826

INTEREST RATE _____ TERM (Months/Years) _____
 _____ % ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*
N/A

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE _____ TERM (Months/Years) _____
 _____ % ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD
☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments: _____

SCHEDULE B
Interests in Real Property
(Including Rental Income)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name _____

STREET ADDRESS OR PRECISE LOCATION 1940 Pamela St	
CITY Oxnard CA 93036	
FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: _____/_____/10 ACQUIRED DISPOSED
NATURE OF INTEREST <input checked="" type="checkbox"/> Ownership/Deed of Trust <input type="checkbox"/> Easement <input type="checkbox"/> Leasehold _____ Yrs. remaining <input type="checkbox"/> Other _____	
IF RENTAL PROPERTY, GROSS INCOME RECEIVED <input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. RENT PAYMENTS	

STREET ADDRESS OR PRECISE LOCATION 1486 Toluca Way	
CITY Madera CA 93638	
FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000	IF APPLICABLE, LIST DATE: _____/_____/10 ACQUIRED DISPOSED
NATURE OF INTEREST <input checked="" type="checkbox"/> Ownership/Deed of Trust <input type="checkbox"/> Easement <input type="checkbox"/> Leasehold _____ Yrs. remaining <input type="checkbox"/> Other _____	
IF RENTAL PROPERTY, GROSS INCOME RECEIVED <input type="checkbox"/> \$0 - \$499 <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000	
SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more. RENT PAYMENTS	

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER* N/A	
ADDRESS (Business Address Acceptable) _____	
BUSINESS ACTIVITY, IF ANY, OF LENDER _____	
INTEREST RATE _____% <input type="checkbox"/> None	TERM (Months/Years) _____
HIGHEST BALANCE DURING REPORTING PERIOD <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000 <input type="checkbox"/> Guarantor, if applicable	

NAME OF LENDER* J.P. MORGAN CHASE	
ADDRESS (Business Address Acceptable) P.O. Box 260172	
BUSINESS ACTIVITY, IF ANY, OF LENDER Baton Rouge LA, 70826	
INTEREST RATE _____% <input type="checkbox"/> None	TERM (Months/Years) _____
HIGHEST BALANCE DURING REPORTING PERIOD <input type="checkbox"/> \$500 - \$1,000 <input type="checkbox"/> \$1,001 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> OVER \$100,000 <input type="checkbox"/> Guarantor, if applicable	

Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name _____

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

House Rental

ADDRESS (Business Address Acceptable)

808 S "F" St., Oxnard CA 93030

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Rental Property

YOUR BUSINESS POSITION

Owner/Landlord

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☒ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

House Rental

ADDRESS (Business Address Acceptable)

1940 Pamela St., Oxnard CA 93036

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Rental Property

YOUR BUSINESS POSITION

Owner/Landlord

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☒ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

_____ % ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address

_____ City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

SCHEDULE C
Income, Loans, & Business
Positions
(Other than Gifts and Travel Payments)

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name _____

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

Four Plex

ADDRESS (Business Address Acceptable)

721 S "F" St. Oxnard CA 93030

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Rental Activity

YOUR BUSINESS POSITION

Owner/Landlord

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☒ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► **1. INCOME RECEIVED**

NAME OF SOURCE OF INCOME

House Rental

ADDRESS (Business Address Acceptable)

1486 Toluca Way, Madera CA 93638

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Rental Property

YOUR BUSINESS POSITION

Owner/Landlord

GROSS INCOME RECEIVED

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☐ Salary ☐ Spouse's or registered domestic partner's income

☐ Loan repayment ☐ Partnership

☐ Sale of _____
(Property, car, boat, etc.)

☐ Commission or ☒ Rental Income, list each source of \$10,000 or more

☐ Other _____
(Describe)

► **2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD**

* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000
☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000
☐ OVER \$100,000

INTEREST RATE

_____ % ☐ None

TERM (Months/Years)

SECURITY FOR LOAN

☐ None ☐ Personal residence

☐ Real Property _____
Street address

_____ City

☐ Guarantor _____

☐ Other _____
(Describe)

Comments: _____

SCHEDULE D
Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name _____ _____ _____

► NAME OF SOURCE
St. John's Healthcare Foundation
 ADDRESS (Business Address Acceptable)
1600 North Rose Avenue
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>5/15/10</u>	<u>\$ 125</u>	<u>Invitation - Foundation Dinner</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

► NAME OF SOURCE
Comite Cultural Mexicano
 ADDRESS (Business Address Acceptable)
P.O. Box 52312
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9/4/10</u>	<u>\$ 60</u>	<u>Invitation - Board Members Dinner</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

► NAME OF SOURCE
Consulado de México in Oxnard
 ADDRESS (Business Address Acceptable)
3151 W. Fifth St. # E-100
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9/15/10</u>	<u>\$ 50</u>	<u>Invitation - Consul Rogelio Flores Dinner</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

► NAME OF SOURCE
Oxnard Chamber of Commerce
 ADDRESS (Business Address Acceptable)
400 E. Esplanade Dr., Suite 302
 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
<u>9/24/10</u>	<u>\$ 50</u>	<u>Invitation - Military Appreciation Dinner</u>
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

► NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

► NAME OF SOURCE

 ADDRESS (Business Address Acceptable)

 BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____
____/____/____	\$ _____	_____

Comments: _____